



Dates: July 22 - 26, 2019

Time: 12:00 P.M. - 4:00 P.M.

Where: Cary Christian School Auditorium

Who: Rising 6th - Rising 9th Graders

(Willing to consider other ages, but preference goes to Middle School)

Cost: \$200

Camp Size: Min. 8 - Max. 22

Acting Basics

Scene Study

Character Development

Improv Games

Beginning Stage Combat

Sword Fighting Basics (safety swords)

All Levels of Experience Welcome!

In order to ensure a spot in camp, submit forms to my upstairs mailbox along with a check made out to **CARLENE CEARLEY** for \$200, or mail to Carlene Cearley, **110 Canon Gate Dr., Cary, NC 27518.**

- Wear comfortable modest clothing
- Bring a water bottle
- Plan on some light "homework" (script memorization, combat choreography practice, etc.)

This Summer Drama Camp is designed to bring together different ages and experience levels in a concentrated, super-fun environment - culminating in a recital-type performance at the end of class on Friday. Don't hesitate to contact me with any questions at carlene@cearley.org. My plan is to gear camp content to the experience and interests of our participants. I look forward to a fun and creative week!

Blessings!

Carlene Cearley

carlene@cearley.org

919-616-3951 (cell)

NOTE: I carefully plan camp based on the roster. Please note these new policies. Register as soon as possible to secure a spot. **REGISTRATION and CANCELLATION Deadline is JULY 12, 2019. NO REFUNDS WILL BE ISSUED AFTER THIS DATE.**

2019 Cary Christian School Summer Drama Camp Registration Form

Student Information

First _____ Middle _____ Last _____ Gender: Male __ Female __
Nickname _____ Grade _____ Birth date ____/____/____ Age (as of July 22, 2019) _____
E-Mail _____
Drama Experience (none necessary) : _____

What are you hoping to learn/cover in camp?: _____

I understand that application to camp indicates a firm commitment and that curriculum will be designed to specifically include me in daily group activities. I understand that I will be expected to attend and participate (barring illness or emergency) as well as be punctual and respectful and adhere to all safety standards. Failure to adhere to these standards could result in dismissal without refund. I agree to participate to the best of my ability.

Student Signature _____

Parent/Guardian - Contact Information

First _____ Last _____
Street Address _____

Town/City _____ State ____ Zip Code _____ Home Phone _____ Work Phone _____

Cell phone _____ E-Mail _____ Secondary E-mail _____

Emergency Contact Information

Emergency Contact #1

First Name _____ Last Name _____ Best Phone _____ Relation to child _____

Emergency Contact #2

First Name _____ Last Name _____ Best Phone _____ Relation to child _____

Photo/Video Release

I hereby give permission for my child to be photographed/videoed during the **2019 Cary Christian School Summer Drama Camp**. Photos/Videos might be used for the school yearbook, other school publications, and/or camp/drama promotions. Videos might be used within camp as teaching tools.

Parent's/Guardian's Initials _____

Terms of Agreement

I understand that application to camp indicates a firm commitment and that curriculum will be designed to specifically include my student in daily group activities. I understand that he/she will be expected to attend and participate (barring illness or emergency) as well as be punctual and respectful and adhere to all safety standards. Failure to adhere to these standards could result in dismissal without refund.

*****Cancellation Policy: NO REFUNDS ISSUED AFTER July 12, 2019.**

Guardian Signature: _____ Date: _____

Printed Name of Parent/Guardian: _____

Name _____ Date of Birth _____ Grade _____

THEATER MEDICAL WAIVER

WARNING, AGREEMENT TO OBEY INSTRUCTIONS, RELEASE, ASSUMPTION OF RISK, AND AGREEMENT TO HOLD HARMLESS

Both the applicant student and a parent or guardian must read carefully and sign below.

STUDENT

I hereby assume all the risks associated with participation and agree to hold Cary Christian School, its employees, and volunteers harmless from any and all liability, actions, causes of action, debts, claims or demands of any kind and nature whatsoever which may arise by or in connection with my participation in any activities related to Cary Christian School Drama. The terms hereof shall serve as a release and assumption of risk for my heirs, estate, executor, administrator, assignees, and for all members of my family.

Date _____, 20_____

Signature of Student

PARENT

I hereby assume all the risks associated with participation and agree to hold Cary Christian School, its employees, and volunteers harmless from any and all liability, actions, causes of action, debts, claims or demands of any kind and nature whatsoever which may arise by or in connection with my participation in any activities related to Cary Christian School Drama. The terms hereof shall serve as a release and assumption of risk for my son's/daughter's heirs, estate, executor, administrator, assignees, and for all members of his/her family.

Date _____, 20_____

Signature of Parent or Guardian

AUTHORIZATION TO TREAT A MINOR

I (We), the undersigned parent, parents or legal guardian of _____

Minor's Name

authorize any hospital or clinic or licensed physician to treat my/our child, charge with any x-ray examination, anesthetic, medical or surgical diagnosis rendered under the general or special supervision of any member of the medical staff of the hospital/clinic or office of a physician who are licensed to practice in the State of North Carolina. It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority and power to render care when effort shall be made to contact the undersigned prior to rendering treatment to the patient, but that treatment will not be withheld if the undersigned cannot be reached.

Please list any special treatment instructions including allergies/medical conditions:

This consent shall remain in effective until the end of the minor's participation in the 2019 Middle School Drama Camp.

Signature of Parent/Legal Guardian

Date

Phone